

PART B - FEE TRANSMITTAL

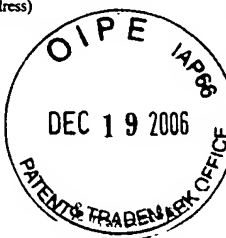
Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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020210 7590 11/30/2006

DAVIS & BUJOLD, P.L.L.C.
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Michael J. BUJOLD	(Depositor's name)
<i>Michael J. Bujold</i>	(Signature)
December 15, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/758,742	01/16/2004	Gerhard Gumpoltsberger	ZAHFRI P597US	6384

TITLE OF INVENTION: MULTI-STAGE TRANSMISSION

12/28/2006 EMAIL2 00032070 10758742

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/28/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, HA DINH	3681	475-276000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ZF Friedrichshafen AG

D-88038 Friedrichshafen GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) <input checked="" type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).
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5. Change in Entity Status (from status indicated above)
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date **15 December 2006**



Typed or printed name **Michael J. BUJOLD**

Registration No. **32,018**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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  <p>TRANSMITTAL FORM</p> <p><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/758,742
	Filing Date	January 16, 2004
	First Named Inventor	Gerhard GUMPOLTSBERGER
	Group Art Unit	3681
	Examiner Name	Ha Dinh HO
Total No. of Pages in this Submission: 3	Attorney Docket Number	ZAHFRI P597US

ENCLOSURES (check all that apply)

■ Fee Transmittal Form

■ Fee attached

☐ Amendment/Response☐ After Final☐ Affidavits/declaration(s)☐ Extension of Time Request
(in Duplicate)☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Response to Missing Part/s Incomplete Application☐ Response to Missing Parts under 37 CFR 1.52 or 1.53☐ Assignment papers
(for an Application)☐ Drawing(s)☐ Licensing-related Papers☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition
(DELETED - no longer useful)☐ To Convert a Provisional Petition☐ Power of Attorney, Revocation Change of Correspondence Address☐ Terminal Disclaimer☐ Small Entity Statement☐ Request for Refund☐ After Allowance Communication to Group☐ Appeal Communication to Board of Appeals and Interferences☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter■ Additional Enclosure(s)
(please identify below):Postcard
Submission of Issue Fee
"Fee Address" Indication Form

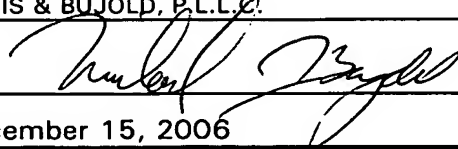
REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name

Michael J. BUJOLD
DAVIS & BUJOLD, P.L.L.C.Reg. No. 32,018
CUSTOMER NO. 020210

Signature



Date

December 15, 2006

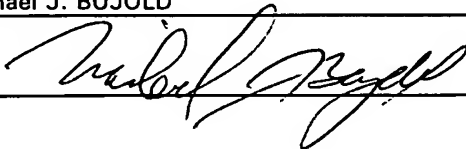
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Date: December 15, 2006 (lfb)